

**POLICY AND PROCEDURES FOR SERVING DEAF AND  
HARD OF HEARING INDIVIDUALS, INCLUDING PURCHASE OF  
HEARING AIDS AND OTHER ASSISTIVE LEARNING DEVICES**

**I. LEGAL AUTHORITY:**

Rehabilitation Act of 1973 (Public Law 93-112) as amended, 34 CFR 361.14(b); 34 CFR 361.40(a).

**II. POLICY STATEMENT AND PURPOSE:**

**A. SERVING DEAF AND HARD OF HEARING INDIVIDUALS**

**1. Sign Language Competency**

Serving individuals who are deaf or significantly hearing-impaired and who rely primarily upon visual communication modes necessitates fluency in American Sign Language (ASL) and/or other sign systems or the use of a sign language interpreter for each significant personal contact. Counselor fluency in ASL will be encouraged.

**2. Use of Interpreters**

Access to services, including diagnostics, must be assured by Office of Rehabilitation Services (ORS). The Agency will arrange and pay for qualified interpreters except in those instances where service providers are also mandated by Section 504 of the Rehabilitation Act, by ADA, or by State law, to make interpreters available. In the event of a conflict regarding the applicability of Section 504, etc. to a service provider, ORS will assure that the interpreter is provided, and may subsequently bill the service provider to recover interpreter costs. Care will be taken to assure that interpreters with specialized skills are utilized in specific situations (i.e. medical).

**3. Counselor Specialization in Deafness**

Because most prelingually deaf individuals experience late language learning, vocational considerations not only include communication but cultural and educational differences.

The complexity of needs of individuals with deafness require vocational rehabilitation counselors who are specialists in deafness rehabilitation.

The Agency will maintain state-wide specialized caseloads.

**4. State Coordinator for the Deaf (SCD)**

Because of the complexities of the impairment and the intense and varied service needs of deaf and hard of hearing individuals, ORS will assign one management staff person to function as State Coordinator for the Deaf and to have primary responsibility for the planning, development and implementation of programming for vocational rehabilitation services for individuals with hearing loss.

**B. HEARING AIDS AND OTHER ASSISTIVE LISTENING DEVICES**

**1. Regulatory Requirements**

Office of Rehabilitation Services will not be responsible for assisting in the purchase of a hearing aid or other assistive listening devices if these have been prescribed and provided before the determination of eligibility and development of the Individualized Plan for Employment (IPE). This policy is consistent with the regulatory requirement that VR services be provided in accordance with the written plan.

**2. Assessing the Vocational Implementation of Hearing Loss**

In determining if a hearing loss constitutes a substantial impediment to employment, the counselor must examine the individual's functioning as well as the audiological evidence. In all cases where the vocational goal is homemaker, the Homemaker Activities Chart for Hearing-Impaired Individuals must be completed or comparable narrative detail provided to demonstrate that the individual has/can function as a homemaker and to identify specific vocational barriers that have risen from the disability.

When examining the audiological evidence, counselors should consider the pure tone loss in the speech range (500-1000-2000 Hz) and the individual's ability to understand speech. Some individuals can hear pure tones and speech sounds, but because of a mixed, or sensorineural loss, are unable to understand what is said. For this reason, speech audiometry not only is accepted as an integral part of the hearing evaluation but is essential to the prediction of outcome of the rehabilitative effort. Speech reception and speech discrimination scores will provide this information.

It is possible for an individual to have a speech discrimination problem and yet have less than 20 db (ANTI 1969) loss in the speech range in the better ear (normal pure tone averages are 0-20 db). An applicant should be made eligible for services if difficulty understanding spoken language represents a substantial impediment to employment. This must be documented in a narrative entry for eligibility. Speech audiometry is also useful in determining

the advisability of speech reading instruction, auditory training, and hearing aid selection and use.

The following scale may be used as a general guide for identification of a possible vocationally handicapping hearing impairment for those individuals with a reported loss of less than 40 db in the ear:

**SPEECH DISCRIMINATION SCORES**

90 - 100% ----- normal limits

75 - 90% ----- slight difficulty  
(comparable to listening over the telephone)

60 - 75% ----- moderate difficulty

50 - 60% ----- poor discrimination  
(marked difficulty in following conversation)

Below 50% ----- very poor discrimination (probably unable to follow running speech)

**III. PROCEDURES:**

**A. CASE ASSIGNMENT**

Those applicants who are hard of hearing but who do not communicate in sign will be assigned to counselors on a geographic basis.

All deaf and severely hard of hearing applicants will be assigned to counselors specializing in deafness. Those applicants who are deaf-blind will be assigned to an appropriate individual at the Services for the Blind and Visually Impaired unit of ORS. Case processing follows general ORS policy and regulations.

**B. INTERPRETER ARRANGEMENTS**

Whenever possible, skilled interpreters, certified by the National Registry of Interpreters for the Deaf or state-screened, will be utilized in the delivery of all ORS services, including diagnostics, for those deaf and hearing-impaired individuals who communicate primarily through sign language. Counselors not fluent in ASL will utilize skilled interpreters for personal counseling contacts as well. Interpreters will be hired through the referral service operated under the R. I. Commission on the Deaf and Hard of Hearing.

**C. DIAGNOSTICS**

In addition to a current assessment of general health and functional capacities required of all ORS applicants, specialty diagnostics for deaf and hearing-impaired

individuals must include an otolaryngological examination and an audiologic evaluation. Counselors should routinely inquire at survey interview if any of these examinations have recently been done and obtain copies if they have been. Where the otolaryngologist and audiologist are not partners, the audiological evaluation report must be sent to the physician when it is available.

**D. HEARING AID ARRANGEMENTS**

If a hearing aid is recommended, the counselor will arrange for the individual to be seen by an audiologist for a follow-up assessment of the recommended aid after the individual has had an opportunity for a trial use.

The follow-up assessment should be scheduled within 30 days of the fitting of the aid by the dispenser or as soon thereafter as the individual and the dispenser have resolved any needed adjustments. The Hearing Aid Assessment form (ORS-10) will be submitted by the audiologist to ORS after the follow-up visit.

Counselors should be aware that a monaural fitting will often suffice to address the vocational handicap. Binaural aids can be purchased if there is documentation that the hearing-impaired individual has successfully used them in the past and the need for binaural amplification continues. For any first-time user of binaural aids, the audiologist must provide justification which is vocationally relevant.

If there remains any question of the vocational benefit of binaural aids, a monaural fitting should be arranged and the individual should use the aid for 30-60 days. The counselor and the individual can then better assess any residual vocational limitations which may be addressed by a second aid.

**E. HEARING AID COST**

Since there is a constant variation of actual dispenser cost for hearing aids, the counselor will phone the dispenser for the actual cost of the prescribed aid. See the Agency fee schedule for the mark-up formula.

**F. PAYMENT CONSIDERATIONS**

When the hearing aid dispenser submits a bill, a cost validation form which has been completed and signed by the dispenser must accompany the bill. Payment of the bill cannot be processed by the ORS business office unless a validation form is attached to the bill. Neither will the bill be processed by the counselor unless the Hearing Aid Assessment report has been received which recommends the aid(s) and the individual concurs that the service is satisfactory.